

After reading this book I was at least as confused as I was before I read it. I wonder if we really should be looking for discreet, well-defined disorders? Or are we dealing with a heterogeneous collection of children who have, in varying degrees and combinations, problems with socialization, verbal and non-verbal communication, motor functioning and so forth? Is it of any real help to label their disorders as AS, AD, PDDNOS, and so forth? Will we find a pot of gold at the end of the rainbow or is what we are seeking a myth? Peter Szatmari, whose excellent chapter (14) stands out from most of the others as a model of clear writing, alludes to this issue, though it remains unresolved. He suggests that, "An alternative to seeing autism and AS as the same or different is to think of different but potentially overlapping developmental trajectories."

There is much poor writing in this book so, by way of contrast, I'll end with a quotation from Walter, the subject of one of the parent essays in Chapter 16.

My intelligence has gotten me out of some situations, allowed me to get good grades, and excel at strategy games. My unsociability has prevented me from joining a mob, or getting into embarrassing situations (if you are unsociable you can't get into an embarrassing situation because you have no social respect to lose). I am not, however, someone to be avoided. I have two good (human) friends and a guinea pig. The guinea pig likes me very much, especially for my magical food-bringing powers. It believes I am made of food, as it has shown many times.

Philip Barker MD.

Children in Therapy: Using the Family as a Resource.

Edited by C. Everett Bailey. Norton Publishers. N.Y. 2000. 529 pp, hardcover \$60.00 Cdn.

Most of us are trained in, at best, a limited number of therapeutic methods. So we may sometimes feel the need for an approach other than those in which we have been trained. When we do, this book could be useful. Its 13 chapters provide descriptions of a variety of therapeutic approaches and techniques, with an emphasis on methods involving families.

All but two of the book's 36 authors are from the U.S.A., with just two Canadians included. The book's three sections cover "Theoretical Perspectives," "Content Areas", and "Additional Perspectives". There is much of practical value throughout. Among the topics addressed are the treatment of sexually abused children, children who have been victims of violence, anxious children, depressed children, oppositional children, children of divorce and, of course, children with ADHD.

In his introduction the editor suggests that "the voices of children" are given little attention in therapy (page xxii). He states also that special efforts may be needed to involve fathers who, he says, are often "excluded or resistant to participate" (page xxiii). I found myself wondering how widely this is the case, but no harm will come of the suggestions made in this book as to how these problems may be countered.

The "additional perspectives" section discusses how to engage families, fathers, and parents in therapy as well as the matter of resilience in children, and children's social and emotional development, and its applications for family therapy.

This is a mainly non-medical book. Only one of the authors is a physician and there is minimal mention of pharmacological treatments. Readers of this journal may be surprised, even taken aback, to find that there is little discussion of a role for psychiatrists. A possible role for medication is mentioned in the chapter on the treatment of depression. The authors do, at least, acknowledge that, if a child is on medication for "depressive symptoms or comorbid psychiatric disorders," the family and the therapist should "maintain communication with the psychiatrist to help coordinate treatment." (Page 229.) The psychiatrist is generally presented as a distant figure, not intimately involved in the therapeutic effort. If this book is any indication, it seems that child psychiatrists play a smaller part in the treatment of disturbed children in the U.S.A. than they do in Canada.

Medicine receives a sideswipe in the chapter on ADHD with the statement that, "Unfortunately, many children are medicated by well-intentioned physicians simply upon the "diagnosis" of ADHD by teacher or parent." Can this really be a common problem?

I also found surprising the minimal mention genograms get in this book. Their value is mentioned in the chapter on "Internal Family Systems Work with Children and Families"; and in the chapter on "Engaging Families in Therapeutic Play", the use of "family play genograms" is discussed, but that's it. Personally I find genograms enormously helpful in assessing families and planning treatment. I guess I'm in a minority.

On the whole the book is well written though there are many places in it where points could have been made more concisely. I believe that all who undertake therapy with children will find something of value in it, and it should be in the libraries of centres where disturbed children are treated.

Philip Barker MD

Developmental Health and the Wealth of Nations: Social, Biological and Educational Dynamics.

Edited by Daniel P. Keating and Clyde Hertzman. The Guilford Press. N.Y. 1999. 406 pages. \$45.00 US.

The book *Developmental Health and the Wealth of Nations* arises from the work of the Population Health Program of the Canadian Institute of Advance Research and its founding president, Dr. Fraser Mustard. The twenty-seven contributors from throughout Canada, the United Kingdom and the United States piece together a set of observations, hypotheses and implications that tie the social well-being and economic wealth of societies to the developmental health of children with an emphasis on the mental and emotional well-being. As a result, this book places a very high social and political priority on ensuring the optimal development of our children and youth. This is probably not news to child and adolescent psychiatrists but what matters here is the public stating of the priority and the science to back it up.

The authors introduce modernity's paradox in which we now live in societies generating unprecedented and record wealth yet create a degree of social stress such that even children and families living in apparently secure economic settings are developing difficulties which may undermine the very talents needed to continue with successful wealth production. Although historians can point to statements throughout recorded time about the degeneration of children and youth, the authors are not as dismissive, noting that there is much more scientific evidence of social change now than ever. The book helps to describe the science and choices between blissful reassurance and grave social concern.

Part I of the volume examines the growing recognition of a strong association between the health of a population and the size of the social distance between members of the population. This is "the gradient effect." Societies with sharp social and economic difference (a steep gradient) among individuals in the population have an overall level of health and well-being that is lower than in societies where these differences are less pronounced. This gradient holds for a wide variety of physical (life expectancy, cardio-vascular disease), cognitive (intelligence testing), school (school attainment), emotional (depression, anxiety), behavioral (anti-social, aggressive) and mental health outcomes. The term 'developmental health' describes this full range of developmental outcomes.

Part II examines the possible pathways mediating the effects from steep social gradients to individual health. Three processes with supporting evidence are proposed. The first derives from the observations of neural development and the way in which it takes place in the growing infant to match the environment to which it is exposed. This process is called neural sculpting. The second process, neuroendocrine development, incorporates the development of the endocrine system as it is affected by the experiences of the early infant and child (e.g. trauma and corticosterone release). The third process is psychoneuroimmunology. Early development can affect overall resistance to disease throughout life and to degenerative disorders at the end of life. In addition to these mediating processes, evidence is reviewed that there are sensitive periods in early life for the development of affect regulation, attention regulation and social regulation. Overall these processes are affected by many of the differing characteristics of the socio-economic gradient and constitute the 'biological embedding' of the environmental experience into the developing child.

The steeper the socio-economic gradients, the more the characteristics of the various levels affect individual growth differentially and, for the most part, detrimentally for those on the lower ends.

Parts III and IV shift from the effects of society on the individual's growth and development to the characteristics of a society that could function in a manner to optimize the developmental health of its citizens. This would be a 'learning society' capable of organizing and acting on behalf of human development. An examination of the human developmental conceptual framework created earlier in the book naturally leads to implications for social organization and functioning to support this learning society. As the authors note, we need to "grasp the core dynamics of the system and move it toward greater prosperity and developmental health - which, we suspect, may become fundamentally the same in the not too distant future."

Part IV leads off with Dr. Dan Offord's work on "Lowering the Burden of Suffering" with clinical, targeted and universal approaches. This is followed by examples of programs that lower aggressive behaviors and improve school readiness and academic attainment in school. Lisbeth Schorr's book 'Within Our Reach' would make an ideal follow up to this book as it presents a wide range of evaluated programs, which are effective during various developmental stages and enhance the mental, emotional, behavioural and physical health of children and youth.

As an edited book the writing styles do vary. However, Keating and Hertzman should be congratulated for ensuring that some similarity for format is followed and that this includes clear well written summaries for each chapter and each part. The science can be a bit difficult in some of the chapters but the message of the book comes through loud and clear. If we do not look after the developing health of our children, we will sacrifice the economic wealth of our nation. This is even more crucial with our shift to knowledge based economies, and paradoxically, potentially aided by this knowledge because we can now collect and evaluate the status of our children more accurately than ever. This can set the stage for a learning society in which we must provide the incentives not just for economic activity but for healthy human development. These incentives will need to drive healthier development as powerfully as profits drive economic activity.

While this is not a book that will leave the child psychiatrist with improved clinical knowledge or skills, it is a book that reaffirms the work of child psychiatry. Child development and its affiliated studies is at the cutting edge creating and maintaining a healthy society. This book may not belong on the desk of every child psychiatrist but does belong on the desk of every political decision maker. They are the ones who must set the policies that can enhance child development, shift the socio-economic gradients and build the wealth of the nation. Child psychiatrists who use this book will bring its knowledge to a wider public and enhance the role of child psychiatry in advocacy for children.

Wade Junek MD

Social Work Practice with Children.

Nancy Boyd Webb. The Guilford Press. N.Y. 1996. 390 pp. \$35.00 U.S.

This comprehensive text provides readers with a useful resource in the fundamentals of social work practice with children. The author, an educator in social work at Fordham University and a family social work practitioner is an acclaimed advocate for drawing attention to the special needs of children. In addition, the author has been credited with improving the training of clinicians in evidence based methods of helping children that are appropriate to children's developmental age and understanding.

The book begins with the author's ecological-developmental framework and integrates common principles of several different approaches into a practical and seemingly effective model of practice. Unfortunately, due to the publishers' oversight the book provided for the review had 12 blank pages in the first four chapters. Chapter five illustrates the highly readable and 'keep it simple style' of writing that would be most helpful to undergraduate students learning about the essentials of case management: 'contracting, planning interventions, and tracking progress.' Chapters six to nine provide different methods of helping children in the context of individual therapy, working with the family, group work with children and school-based interventions. The format applies case studies, along with theoretical frameworks and corresponding interventions to depict the overall process of helping children and families. Each chapter includes treatment summaries, insightful commentaries, ethical considerations and discussion questions.

The remaining chapters cover a wide range of challenging topics including: helping children in nontraditional families, families affected by illness and death, families coping with substance use disorders, out of home placements and foster homes, along with victims and witnesses of family violence. The idealized clinical examples provide guidance on how to help children in these special circumstances. The closing chapter focuses on global factors of chronic poverty and homelessness, HIV/AIDS epidemic, displaced populations due to war and natural disasters, and social policy development.

The author challenges the reader to adapt to the global changes and to recognize the value of inter-professional collaboration and of parents as